

**PLEASE USE THIS FORMAT WHEN COMPLETING
THE ORIGINAL IRREVOCABLE
STOCK OR BOND POWER
FORM ATTACHED**



DEPARTMENT OF BUSINESS AND INDUSTRY
DIVISION OF INSURANCE

1818 East College Pkwy., Suite 103
Carson City, Nevada 89706
(775) 687-0700 • Fax (775) 687-0787
Website: doi.nv.gov
E-mail: insinfo@doi.state.nv.us

IRREVOCABLE STOCK OR BOND POWER

The undersigned does hereby assign to the **State of Nevada, Department of Business and Industry, Division of Insurance**, the following security, _____
_____ for the benefit and protection of all policyholders of _____
_____, a company domiciled in the State of Nevada; pursuant to NRS 680A.140 Required deposit. The security is being held in trust at the _____. This document is irrevocable and shall continue in full force and effect until surrendered to _____ with the release of the **Division of Insurance** endorsed hereon; provided, however, that the **Division of Insurance**, in its discretion, may present this power at any time to _____ and upon delivery of said securities by _____ to the **Division of Insurance**, or to the designee of the **Division of Insurance**, _____ shall have no further liability with respect to said securities.

Co. name _____ NAIC # _____
Co. street address _____
City, state, zip _____

Authorized Signature: _____ Date: _____
Title: _____ Telephone no.: _____

DIVISION OF INSURANCE RELEASE
(For Division Use ONLY)

Pursuant to the authority vested in me the securities described above are released from the terms and conditions of this power and _____ may surrender, deliver or otherwise dispose of said securities in any manner so ordered by _____

For the State of Nevada, Division of Insurance: _____
Title: _____ Commissioner of Insurance _____ Date: _____

**THIS NOTARY ACKNOWLEDGMENT MUST BE
ATTACHED TO EACH IRREVOCABLE STOCK OR BOND POWER**

Name of Company _____ NAIC # _____

State of _____,

County of _____

On _____ personally appeared before me,
DATE

Company authorized signature who acknowledged that he
executed the above instrument.

Please print name of the above individual.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official
stamp at my office in the county of _____
the day and year in this certificate first above written.

Signature of Notary